

AMENDED IN ASSEMBLY JUNE 22, 2016

AMENDED IN ASSEMBLY JUNE 16, 2016

AMENDED IN SENATE MAY 4, 2015

AMENDED IN SENATE APRIL 9, 2015

SENATE BILL

No. 622

Introduced by Senator Hernandez

February 27, 2015

An act to amend Sections 3041 and 3110 of, to add Sections 3041.4, 3041.5, 3041.6, 3041.7, and 3041.8 to, and to repeal and add Sections 3041.1, 3041.2, and 3041.3 of, the Business and Professions Code, relating to optometry, and making an appropriation therefor.

LEGISLATIVE COUNSEL'S DIGEST

SB 622, as amended, Hernandez. Optometry.

The Optometry Practice Act provides for the licensure and regulation of the practice of optometry by the State Board of Optometry, and defines the practice of optometry to include, among other things, the prevention and diagnosis of disorders and dysfunctions of the visual system, and the treatment and management of certain disorders and dysfunctions of the visual system, as well as the provision of rehabilitative optometric services, and doing certain things, including, but not limited to, the examination of the human eyes, the determination of the powers or range of human vision, and the prescribing of contact and spectacle lenses. Existing law authorizes an optometrist certified to use therapeutic pharmaceutical agents to diagnose and treat specified conditions, use specified pharmaceutical agents, and order specified diagnostic tests. The act requires optometrists treating or diagnosing eye disease, as specified, to be held to the same standard of care to

which physicians and surgeons and osteopathic physician and surgeons are held. The act requires an optometrist, in certain circumstances, to refer a patient to an ophthalmologist or a physician and surgeon, including when a patient has been diagnosed with a central corneal ulcer and the central corneal ulcer has not improved within 48 hours of the diagnosis. The act makes a violation of any of its provisions a crime. All moneys collected pursuant to the act, except where otherwise provided, are deposited in the Optometry Fund and continuously appropriated to the board to carry out the act.

This bill would revise and recast those provisions. The bill would delete certain requirements that an optometrist refer a patient to an ophthalmologist or a physician and surgeon, including when a patient has been diagnosed with a central corneal ulcer and the central corneal ulcer has not improved within 48 hours of the diagnosis. The bill would additionally define the practice of optometry as the provision of habilitative optometric services, and would authorize the board to allow optometrists to use nonsurgical technology to treat any authorized condition under the act. The bill would additionally authorize an optometrist certified to use therapeutic pharmaceutical agents to collect blood by skin puncture or venipuncture, to perform skin tests, as specified, to diagnose ocular allergies, and to use mechanical lipid extraction of meibomian glands and nonsurgical techniques. The bill would require the board to grant an optometrist certified to treat glaucoma a certificate for the use of specified immunizations if certain conditions are met, including, among others, that the optometrist is certified in basic life support. The bill would additionally authorize an optometrist certified to use therapeutic pharmaceutical agents to, among other things, be certified to use anterior segment lasers, as specified, and to be certified to perform specified minor procedures, as specified, if certain requirements are met.

The bill would require the board to charge a fee of not more than \$150 to cover the reasonable regulatory cost of certifying an optometrist to use anterior segment lasers, a fee of not more than \$150 to cover the reasonable regulatory cost of certifying an optometrist to use minor procedures, and a fee of not more than \$100 to cover the reasonable regulatory cost of certifying an optometrist to use immunizations. Because this bill would increase those moneys deposited in a continuously appropriated fund, it would make an appropriation.

Existing law establishes the Office of Statewide Health Planning and Development, which is vested with all the duties, powers,

responsibilities, and jurisdiction of the State Department of Public Health relating to health planning and research development.

This bill would declare the intent of the Legislature that the Office of Statewide Health Planning and Development designate a pilot project to test, demonstrate, and evaluate expanded roles for optometrists in the performance of management and treatment of diabetes mellitus, hypertension, and hypercholesterolemia.

Because a violation of the act is a crime, this bill would expand the scope of an existing crime and would, therefore, result in a state-mandated local program.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

Vote: majority. Appropriation: yes. Fiscal committee: yes.
State-mandated local program: yes.

The people of the State of California do enact as follows:

- 1 SECTION 1. Section 3041 of the Business and Professions
- 2 Code is amended to read:
- 3 3041. (a) The practice of optometry includes the prevention
- 4 and diagnosis of disorders and dysfunctions of the visual system,
- 5 and the treatment and management of certain disorders and
- 6 dysfunctions of the visual system, as well as the provision of
- 7 habilitative or rehabilitative optometric services, and is the doing
- 8 of any or all of the following:
- 9 (1) The examination of the human eye or eyes, or its or their
- 10 appendages, and the analysis of the human vision system, either
- 11 subjectively or objectively.
- 12 (2) The determination of the powers or range of human vision
- 13 and the accommodative and refractive states of the human eye or
- 14 eyes, including the scope of its or their functions and general
- 15 condition.
- 16 (3) The prescribing or directing the use of, or using, any optical
- 17 device in connection with ocular exercises, visual training, vision
- 18 training, or orthoptics.
- 19 (4) The prescribing of contact and spectacle lenses for, or the
- 20 fitting or adaptation of contact and spectacle lenses to, the human

1 eye, including lenses that may be classified as drugs or devices by
2 any law of the United States or of this state.

3 (5) The use of topical pharmaceutical agents for the purpose of
4 the examination of the human eye or eyes for any disease or
5 pathological condition.

6 (b) The State Board of Optometry shall, by regulation, establish
7 educational and examination requirements for licensure to ensure
8 the competence of optometrists to practice pursuant to this chapter,
9 except as specified in Section 3041.3 related to the use of anterior
10 segment lasers and in Section 3041.4 related to minor procedures.
11 Satisfactory completion of the required educational and
12 examination requirements shall be a condition for the issuance of
13 an original optometrist license or required certifications pursuant
14 to this chapter.

15 (c) The board may promulgate regulations authorizing
16 optometrists to use noninvasive, nonsurgical technology to treat
17 a condition authorized by this chapter. The board shall require a
18 licensee to take a minimum of four hours of education courses on
19 the new technology and perform an appropriate number of complete
20 clinical procedures on live human patients to qualify to use each
21 new technology authorized by the board pursuant to this
22 subdivision.

23 SEC. 2. Section 3041.1 of the Business and Professions Code
24 is repealed.

25 SEC. 3. Section 3041.1 is added to the Business and Professions
26 Code, to read:

27 3041.1. (a) (1) An optometrist who is certified to use
28 therapeutic pharmaceutical agents pursuant to this section may
29 also diagnose and treat the human eye or eyes, or any of its or their
30 appendages, for all of the following conditions:

31 (A) Through medical treatment, infections of the anterior
32 segment and adnexa.

33 (B) Ocular allergies of the anterior segment and adnexa.

34 (C) Ocular inflammation, nonsurgical in cause except when
35 comanaged with the treating physician and surgeon, limited to
36 inflammation resulting from traumatic iritis, peripheral corneal
37 inflammatory keratitis, episcleritis, and unilateral nonrecurrent
38 nongranulomatous idiopathic iritis in patients over 18 years of age.

39 (D) Traumatic or recurrent conjunctival or corneal abrasions
40 and erosions.

1 (E) Corneal and conjunctival surface disease and dry eyes
2 disease.

3 (F) Ocular pain that is nonsurgical in cause, except when
4 comanaged with the treating physician and surgeon.

5 (G) Hypotrichosis and blepharitis.

6 (2) For purposes of this section, “treat” means the use of
7 therapeutic pharmaceutical agents, as described in subdivision (b),
8 and the procedures described in subdivision (c).

9 (3) For purposes of this chapter, “adnexa” means ocular adnexa.

10 (b) In diagnosing and treating the conditions listed in subdivision
11 (a), an optometrist certified to use therapeutic pharmaceutical
12 agents pursuant to this section may use all of the following
13 therapeutic pharmaceutical agents:

14 (1) Topical pharmaceutical agents for the purpose of the
15 examination of the human eye or eyes for any disease or
16 pathological condition, including, but not limited to, topical
17 miotics.

18 (2) Topical lubricants.

19 (3) Antiallergy agents. In using topical steroid medication for
20 the treatment of ocular allergies, an optometrist shall consult with
21 an ophthalmologist if the patient’s condition worsens 21 days after
22 diagnosis.

23 (4) Topical and oral anti-inflammatories.

24 (5) Topical antibiotic agents.

25 (6) Topical hyperosmotics.

26 (7) Topical and oral antiglaucoma agents pursuant to the
27 certification process defined in Section 3041.2.

28 (8) Nonprescription medications used for the rational treatment
29 of an ocular disorder.

30 (9) Oral antihistamines.

31 (10) Prescription oral nonsteroidal anti-inflammatory agents.

32 (11) Oral antibiotics for medical treatment of ocular disease.

33 (12) Topical and oral antiviral medication for the medical
34 treatment of herpes simplex viral keratitis, herpes simplex viral
35 conjunctivitis, periocular herpes simplex viral dermatitis, varicella
36 zoster viral keratitis, varicella zoster viral conjunctivitis, and
37 periocular varicella zoster viral dermatitis.

38 (13) Oral analgesics that are not controlled substances.

39 (14) Codeine with compounds and hydrocodone with
40 compounds as listed in the California Uniform Controlled

1 Substances Act (Division 10 (commencing with Section 11000)
2 of the Health and Safety Code) and the United States Uniform
3 Controlled Substances Act (21 U.S.C. Sec. 801 et seq.). The use
4 of these agents shall be limited to five days, with a referral to an
5 ophthalmologist if the pain persists.

6 (c) An optometrist who is certified to use therapeutic
7 pharmaceutical agents pursuant to this section may also perform
8 all of the following:

- 9 (1) Corneal scraping with cultures.
- 10 (2) Debridement of corneal epithelia.
- 11 (3) Mechanical epilation.
- 12 (4) Collection of blood by skin puncture or venipuncture for
13 testing patients suspected of having diabetes.
- 14 (5) Suture removal, with prior consultation with the treating
15 health care provider.
- 16 (6) Treatment or removal of sebaceous cysts by expression.
- 17 (7) Administration of oral fluorescein to patients suspected as
18 having diabetic retinopathy.
- 19 (8) Use of an auto-injector to counter anaphylaxis.
- 20 (9) Ordering of smears, cultures, sensitivities, complete blood
21 count, mycobacterial culture, acid fast stain, urinalysis, tear fluid
22 analysis, and X-rays necessary for the diagnosis of conditions or
23 diseases of the eye or adnexa. An optometrist may order other
24 types of images subject to prior consultation with an
25 ophthalmologist or appropriate physician and surgeon.
- 26 (10) A clinical laboratory test or examination classified as
27 waived under the Clinical Laboratory Improvement Amendments
28 of 1988 (CLIA)(42 U.S.C. Sec. 263a; Public Law 100-578)-~~and~~
29 ~~that is~~ *and designated as waived in paragraph (9)* necessary for
30 the diagnosis of conditions and diseases of the eye or adnexa, to
31 detect systemic disease with ocular effects, or if otherwise
32 specifically authorized by this chapter.
- 33 (11) Skin test to diagnose ocular allergies. Skin tests shall be
34 limited to the superficial layer of the skin.
- 35 (12) Punctal occlusion by plugs, excluding laser, diathermy,
36 cryotherapy, or other means constituting surgery as defined in this
37 chapter.
- 38 (13) The prescription of therapeutic contact lenses, diagnostic
39 contact lenses, or biological or technological corneal devices that
40 diagnose or treat a condition authorized under this chapter.

1 (14) Removal of foreign bodies from the cornea, eyelid, and
2 conjunctiva with any appropriate instrument other than a scalpel.
3 Corneal foreign bodies shall be nonperforating, be no deeper than
4 the midstroma, and require no surgical repair upon removal.

5 (15) For patients over 12 years of age, lacrimal irrigation and
6 dilation, excluding probing of the nasal lacrimal tract. The board
7 shall certify any optometrist who graduated from an accredited
8 school of optometry before May 1, 2000, to perform this procedure
9 after submitting proof of satisfactory completion and confirmation
10 of 10 procedures under the supervision of an ophthalmologist or
11 optometrist who is certified in lacrimal irrigation and dilation. Any
12 optometrist who graduated from an accredited school of optometry
13 on or after May 1, 2000, shall be exempt from the certification
14 requirement contained in this paragraph.

15 (16) Use of mechanical lipid extraction of meibomian glands
16 and nonsurgical techniques.

17 (d) In order to be certified to use therapeutic pharmaceutical
18 agents and authorized to diagnose and treat the conditions listed
19 in this section, an optometrist shall apply for a certificate from the
20 board and meet all requirements imposed by the board.

21 (e) The board shall grant a certificate to use therapeutic
22 pharmaceutical agents to any applicant who graduated from a
23 California accredited school of optometry prior to January 1, 1996,
24 is licensed as an optometrist in California, and meets all of the
25 following requirements:

26 (1) Satisfactorily completes a didactic course of no less than 80
27 classroom hours in the diagnosis, pharmacological, and other
28 treatment and management of ocular disease provided by either
29 an accredited school of optometry in California or a recognized
30 residency review committee in ophthalmology in California.

31 (2) Completes a preceptorship of no less than 65 hours, during
32 a period of not less than two months nor more than one year, in
33 either an ophthalmologist's office or an optometric clinic. The
34 training received during the preceptorship shall be on the diagnosis,
35 treatment, and management of ocular, systemic disease. The
36 preceptor shall certify completion of the preceptorship.
37 Authorization for the ophthalmologist to serve as a preceptor shall
38 be provided by an accredited school of optometry in California,
39 or by a recognized residency review committee in ophthalmology,
40 and the preceptor shall be licensed as an ophthalmologist in

1 California, board certified in ophthalmology, and in good standing
2 with the Medical Board of California. The individual serving as
3 the preceptor shall schedule no more than three optometrist
4 applicants for each of the required 65 hours of the preceptorship
5 program. This paragraph shall not be construed to limit the total
6 number of optometrist applicants for whom an individual may
7 serve as a preceptor, and is intended only to ensure the quality of
8 the preceptorship by requiring that the ophthalmologist preceptor
9 schedule the training so that each applicant optometrist completes
10 each of the 65 hours of the preceptorship while scheduled with no
11 more than two other optometrist applicants.

12 (3) Successfully completes a minimum of 20 hours of
13 self-directed education.

14 (4) Passes the National Board of Examiners in Optometry's
15 "Treatment and Management of Ocular Disease" examination or,
16 in the event this examination is no longer offered, its equivalent,
17 as determined by the State Board of Optometry.

18 (5) Passes the examination issued upon completion of the
19 80-hour didactic course required under paragraph (1) and provided
20 by the accredited school of optometry or residency program in
21 ophthalmology.

22 (6) When any or all of the requirements contained in paragraph
23 (1), (4), or (5) have been satisfied on or after July 1, 1992, and
24 before January 1, 1996, an optometrist shall not be required to
25 fulfill the satisfied requirements in order to obtain certification to
26 use therapeutic pharmaceutical agents. In order for this paragraph
27 to apply to the requirement contained in paragraph (5), the didactic
28 examination that the applicant successfully completed shall meet
29 equivalency standards, as determined by the board.

30 (7) Any optometrist who graduated from an accredited school
31 of optometry on or after January 1, 1992, and before January 1,
32 1996, shall not be required to fulfill the requirements contained in
33 paragraphs (1), (4), and (5).

34 (f) The board shall grant a certificate to use therapeutic
35 pharmaceutical agents to any applicant who graduated from a
36 California accredited school of optometry on or after January 1,
37 1996, who is licensed as an optometrist in California, and who
38 meets all of the following requirements:

1 (1) Passes the National Board of Examiners in Optometry's
2 national board examination, or its equivalent, as determined by
3 the State Board of Optometry.

4 (2) Of the total clinical training required by a school of
5 optometry's curriculum, successfully completed at least 65 of those
6 hours on the diagnosis, treatment, and management of ocular,
7 systemic disease.

8 (3) Is certified by an accredited school of optometry as
9 competent in the diagnosis, treatment, and management of ocular,
10 systemic disease to the extent authorized by this section.

11 (4) Is certified by an accredited school of optometry as having
12 completed at least 10 hours of experience with a board-certified
13 ophthalmologist.

14 (g) The board shall grant a certificate to use therapeutic
15 pharmaceutical agents to any applicant who is an optometrist who
16 obtained his or her license outside of California if he or she meets
17 all of the requirements for an optometrist licensed in California to
18 be certified to use therapeutic pharmaceutical agents.

19 (1) In order to obtain a certificate to use therapeutic
20 pharmaceutical agents, any optometrist who obtained his or her
21 license outside of California and graduated from an accredited
22 school of optometry prior to January 1, 1996, shall be required to
23 fulfill the requirements set forth in subdivision (e). In order for the
24 applicant to be eligible for the certificate to use therapeutic
25 pharmaceutical agents, the education he or she received at the
26 accredited out-of-state school of optometry shall be equivalent to
27 the education provided by any accredited school of optometry in
28 California for persons who graduated before January 1, 1996. For
29 those out-of-state applicants who request that any of the
30 requirements contained in subdivision (e) be waived based on
31 fulfillment of the requirement in another state, if the board
32 determines that the completed requirement was equivalent to that
33 required in California, the requirement shall be waived.

34 (2) In order to obtain a certificate to use therapeutic
35 pharmaceutical agents, any optometrist who obtained his or her
36 license outside of California and who graduated from an accredited
37 school of optometry on or after January 1, 1996, shall be required
38 to fulfill the requirements set forth in subdivision (f). In order for
39 the applicant to be eligible for the certificate to use therapeutic
40 pharmaceutical agents, the education he or she received by the

1 accredited out-of-state school of optometry shall be equivalent to
2 the education provided by any accredited school of optometry for
3 persons who graduated on or after January 1, 1996. For those
4 out-of-state applicants who request that any of the requirements
5 contained in subdivision (f) be waived based on fulfillment of the
6 requirement in another state, if the board determines that the
7 completed requirement was equivalent to that required in
8 California, the requirement shall be waived.

9 (3) The State Board of Optometry shall decide all issues relating
10 to the equivalency of an optometrist's education or training under
11 this subdivision.

12 (h) Other than for prescription ophthalmic devices described in
13 subdivision (b) of Section 2541, any dispensing of a therapeutic
14 pharmaceutical agent by an optometrist shall be without charge.

15 (i) Except as authorized by this chapter, the practice of
16 optometry does not include performing surgery. "Surgery" means
17 any procedure in which human tissue is cut, altered, or otherwise
18 infiltrated by mechanical or laser means. "Surgery" does not
19 include those procedures specified in subdivision (c). This section
20 does not limit an optometrist's authority to utilize diagnostic laser
21 and ultrasound technology within his or her scope of practice.

22 (j) In an emergency, an optometrist shall stabilize, if possible,
23 and immediately refer any patient who has an acute attack of angle
24 closure to an ophthalmologist.

25 SEC. 4. Section 3041.2 of the Business and Professions Code
26 is repealed.

27 SEC. 5. Section 3041.2 is added to the Business and Professions
28 Code, to read:

29 3041.2. (a) For purposes of this chapter, "glaucoma" means
30 any of the following:

- 31 (1) All primary open-angle glaucoma.
- 32 (2) Exfoliation and pigmentary glaucoma.
- 33 (3) Increase in intraocular pressure caused by steroid medication
34 prescribed by the optometrist.
- 35 (4) Increase in intraocular pressure caused by steroid medication
36 not prescribed by the optometrist, after consultation and treatment
37 approval by the prescribing physician.

38 (b) An optometrist certified pursuant to Section 3041.1 shall be
39 certified for the treatment of glaucoma, as described in subdivision

(a), in patients over 18 years of age after the optometrist meets the following applicable requirements:

(1) For licensees who graduated from an accredited school of optometry on or after May 1, 2008, submission of proof of graduation from that institution.

(2) For licensees who were certified to treat glaucoma under this section prior to January 1, 2009, submission of proof of completion of that certification program.

(3) For licensees who completed a didactic course of not less than 24 hours in the diagnosis, pharmacological, and other treatment and management of glaucoma, submission of proof of satisfactory completion of the case management requirements for certification established by the board.

(4) For licensees who graduated from an accredited school of optometry on or before May 1, 2008, and are not described in paragraph (2) or (3), submission of proof of satisfactory completion of the requirements for certification established by the board.

SEC. 6. Section 3041.3 of the Business and Professions Code is repealed.

SEC. 7. Section 3041.3 is added to the Business and Professions Code, to read:

3041.3. (a) For the purposes of this chapter, “anterior segment laser” means any of the following:

(1) Therapeutic lasers appropriate for treatment of glaucoma.

(2) Notwithstanding subdivision (a) of Section 3041.2, peripheral iridotomy for the prophylactic treatment of angle closure glaucoma.

(3) Therapeutic lasers used for posterior capsulotomy secondary to cataract surgery.

(b) An optometrist certified to treat glaucoma pursuant to Section 3041.2 shall be additionally certified for the use of anterior segment lasers after submitting proof of satisfactory completion of a course that is approved by the board, provided by an accredited school of optometry, and developed in consultation with an ophthalmologist who has experience educating optometric students. The board shall issue a certificate pursuant to this section only to an optometrist that has graduated from an approved school of optometry.

(1) The board-approved course shall be at least 25 hours in length, and include a test for competency of the following:

- 1 (A) Laser physics, hazards, and safety.
- 2 (B) Biophysics of laser.
- 3 (C) Laser application in clinical optometry.
- 4 (D) Laser tissue interactions.
- 5 (E) Laser indications, contraindications, and potential
- 6 complications.
- 7 (F) Gonioscopy.
- 8 (G) Laser therapy for open-angle glaucoma.
- 9 (H) Laser therapy for angle closure glaucoma.
- 10 (I) Posterior capsulotomy.
- 11 (J) Common complications of the lids, lashes, and lacrimal
- 12 system.
- 13 (K) Medicolegal aspects of anterior segment procedures.
- 14 (L) Peripheral iridotomy.
- 15 (M) Laser trabeculoplasty.
- 16 (2) The school of optometry shall require each applicant for
- 17 certification to perform a sufficient number of complete anterior
- 18 segment laser procedures to verify that the applicant has
- 19 demonstrated competency to practice independently. At a
- 20 minimum, each applicant shall complete 24 anterior segment laser
- 21 procedures on live humans as follows:
- 22 (A) Eight YAG capsulotomy procedures.
- 23 (B) Eight laser trabeculoplasty procedures.
- 24 (C) Eight peripheral iridotomy procedures.
- 25 (c) The board, by regulation, shall set the fee for issuance and
- 26 renewal of a certificate authorizing the use of anterior segment
- 27 lasers at an amount no higher than the reasonable cost of regulating
- 28 anterior segment laser certified optometrists pursuant to this
- 29 section. The fee shall not exceed one hundred fifty dollars (\$150).
- 30 (d) An optometrist certified to use anterior segment lasers
- 31 pursuant to this section shall complete four hours of continuing
- 32 education on anterior segment lasers as part of the required 50
- 33 hours of continuing education required to be completed every two
- 34 years on the diagnosis, treatment, and management of glaucoma.
- 35 SEC. 8. Section 3041.4 is added to the Business and Professions
- 36 Code, to read:
- 37 3041.4. (a) For the purposes of this chapter, “minor procedure”
- 38 means either of the following:
- 39 (1) Removal, destruction, or drainage of lesions of the eyelid
- 40 and adnexa clinically evaluated by the optometrist to be

1 noncancerous, not involving the eyelid margin, lacrimal supply or
2 drainage systems, no deeper than the orbicularis muscle, and
3 smaller than five millimeters in diameter.

4 (2) Closure of a wound resulting from a procedure described in
5 paragraph (1).

6 (3) Administration of injections for the diagnoses or treatment
7 of conditions of the eye and adnexa authorized by this chapter,
8 excluding intraorbital injections and injections administered for
9 cosmetic effect.

10 (4) “Minor procedures” does not include blepharoplasty or other
11 cosmetic surgery procedures that reshape normal structures of the
12 body in order to improve appearance and self-esteem.

13 (b) An optometrist certified to treat glaucoma pursuant to
14 Section 3041.2 shall be additionally certified to perform minor
15 procedures after submitting proof of satisfactory completion of a
16 course that is approved by the board, provided by an accredited
17 school of optometry, and developed in consultation with an
18 ophthalmologist who has experience teaching optometric students.
19 The board shall issue a certificate pursuant to this section only to
20 an optometrist that has graduated from an approved school of
21 optometry.

22 (1) The board-approved course shall be at least 25 hours in
23 length and include a test for competency of the following:

24 (A) Minor surgical procedures.

25 (B) Overview of surgical instruments, asepsis, and the state and
26 federal Occupational Safety and Health Administrations.

27 (C) Surgical anatomy of the eyelids.

28 (D) Emergency surgical procedures.

29 (E) Chalazion management.

30 (F) Epiluminescence microscopy.

31 (G) Suture techniques.

32 (H) Local anesthesia techniques and complications.

33 (I) Anaphylaxis and other office emergencies.

34 (J) Radiofrequency surgery.

35 (K) Postoperative wound care.

36 (L) Injection techniques.

37 (2) The school of optometry shall require each applicant for
38 certification to perform a sufficient number of minor procedures
39 to verify that the applicant has demonstrated competency to

1 practice independently. At a minimum, each applicant shall perform
2 32 complete minor procedures on live humans.

3 (c) The board, by regulation, shall set the fee for issuance and
4 renewal of a certificate authorizing the use of minor procedures
5 at an amount no greater than the reasonable cost of regulating
6 minor procedure certified optometrists pursuant to this section.

7 The fee shall not exceed one hundred fifty dollars (\$150).

8 (d) An optometrist certified to perform minor procedures
9 pursuant to Section 3041.1 shall complete five hours of continuing
10 education on the diagnosis, treatment, and management of lesions
11 of the eyelid and adnexa as part of the 50 hours of continuing
12 education required every two years in Section 3059.

13 SEC. 9. Section 3041.5 is added to the Business and Professions
14 Code, to read:

15 3041.5. (a) The board shall grant to an optometrist a certificate
16 for the use of immunizations described in subdivision (b), if the
17 optometrist is certified pursuant to Section 3041.2 and after the
18 optometrist meets all of the following requirements:

19 (1) Completes an immunization training program endorsed by
20 the federal Centers for Disease Control and Prevention (CDC)
21 that, at a minimum, includes hands-on injection technique, clinical
22 evaluation of indications and contraindications of vaccines, and
23 the recognition and treatment of emergency reactions to vaccines,
24 and maintains that training.

25 (2) Is certified in basic life support.

26 (3) Complies with all state and federal recordkeeping and
27 reporting requirements, including providing documentation to the
28 patient's primary care provider and entering information in the
29 appropriate immunization registry designated by the immunization
30 branch of the State Department of Public Health.

31 (b) For the purposes of this section, "immunization" means the
32 administration of immunizations for influenza, herpes zoster virus,
33 and pneumococcus in compliance with individual Advisory
34 Committee on Immunization Practices (ACIP) vaccine
35 recommendations published by the CDC for persons 18 years of
36 age or older.

37 (c) The board, by regulation, shall set the fee for issuance and
38 renewal of a certificate for the use of immunizations at the
39 reasonable cost of regulating immunization certified optometrists

pursuant to this section. The fee shall not exceed one hundred dollars (\$100).

SEC. 10. Section 3041.6 is added to the Business and Professions Code, to read:

3041.6. An optometrist licensed under this chapter is subject to the provisions of Section 2290.5 for purposes of practicing telehealth.

SEC. 11. Section 3041.7 is added to the Business and Professions Code, to read:

3041.7. Optometrists diagnosing or treating eye disease shall be held to the same standard of care to which physicians and surgeons and osteopathic physicians and surgeons are held. An optometrist shall consult with and, if necessary, refer to a physician and surgeon or other appropriate health care provider when a situation or condition occurs that is beyond the optometrist's scope of practice.

SEC. 12. Section 3041.8 is added to the Business and Professions Code, to read:

3041.8. It is the intent of the Legislature that the Office of Statewide Health Planning and Development, under the Health Workforce Pilot Projects Program, designate a pilot project to test, demonstrate, and evaluate expanded roles for optometrists in the performance of management and treatment of diabetes mellitus, hypertension, and hypercholesterolemia.

SEC. 13. Section 3110 of the Business and Professions Code is amended to read:

3110. The board may take action against any licensee who is charged with unprofessional conduct, and may deny an application for a license if the applicant has committed unprofessional conduct. In addition to other provisions of this article, unprofessional conduct includes, but is not limited to, the following:

(a) Violating or attempting to violate, directly or indirectly assisting in or abetting the violation of, or conspiring to violate any provision of this chapter or any of the rules and regulations adopted by the board pursuant to this chapter.

(b) Gross negligence.

(c) Repeated negligent acts. To be repeated, there must be two or more negligent acts or omissions.

(d) Incompetence.

1 (e) The commission of fraud, misrepresentation, or any act
2 involving dishonesty or corruption, that is substantially related to
3 the qualifications, functions, or duties of an optometrist.

4 (f) Any action or conduct that would have warranted the denial
5 of a license.

6 (g) The use of advertising relating to optometry that violates
7 Section 651 or 17500.

8 (h) Denial of licensure, revocation, suspension, restriction, or
9 any other disciplinary action against a health care professional
10 license by another state or territory of the United States, by any
11 other governmental agency, or by another California health care
12 professional licensing board. A certified copy of the decision or
13 judgment shall be conclusive evidence of that action.

14 (i) Procuring his or her license by fraud, misrepresentation, or
15 mistake.

16 (j) Making or giving any false statement or information in
17 connection with the application for issuance of a license.

18 (k) Conviction of a felony or of any offense substantially related
19 to the qualifications, functions, and duties of an optometrist, in
20 which event the record of the conviction shall be conclusive
21 evidence thereof.

22 (l) Administering to himself or herself any controlled substance
23 or using any of the dangerous drugs specified in Section 4022, or
24 using alcoholic beverages to the extent, or in a manner, as to be
25 dangerous or injurious to the person applying for a license or
26 holding a license under this chapter, or to any other person, or to
27 the public, or, to the extent that the use impairs the ability of the
28 person applying for or holding a license to conduct with safety to
29 the public the practice authorized by the license, or the conviction
30 of a misdemeanor or felony involving the use, consumption, or
31 self-administration of any of the substances referred to in this
32 subdivision, or any combination thereof.

33 (m) (1) Committing or soliciting an act punishable as a sexually
34 related crime, if that act or solicitation is substantially related to
35 the qualifications, functions, or duties of an optometrist.

36 (2) Committing any act of sexual abuse, misconduct, or relations
37 with a patient. The commission of and conviction for any act of
38 sexual abuse, sexual misconduct, or attempted sexual misconduct,
39 whether or not with a patient, shall be considered a crime
40 substantially related to the qualifications, functions, or duties of a

1 licensee. This paragraph shall not apply to sexual contact between
2 any person licensed under this chapter and his or her spouse or
3 person in an equivalent domestic relationship when that licensee
4 provides optometry treatment to his or her spouse or person in an
5 equivalent domestic relationship.

6 (3) Conviction of a crime that requires the person to register as
7 a sex offender pursuant to Chapter 5.5 (commencing with Section
8 290) of Title 9 of Part 1 of the Penal Code. A conviction within
9 the meaning of this paragraph means a plea or verdict of guilty or
10 a conviction following a plea of nolo contendere. A conviction
11 described in this paragraph shall be considered a crime substantially
12 related to the qualifications, functions, or duties of a licensee.

13 (n) Repeated acts of excessive prescribing, furnishing, or
14 administering of controlled substances or dangerous drugs specified
15 in Section 4022, or repeated acts of excessive treatment.

16 (o) Repeated acts of excessive use of diagnostic or therapeutic
17 procedures, or repeated acts of excessive use of diagnostic or
18 treatment facilities.

19 (p) The prescribing, furnishing, or administering of controlled
20 substances or drugs specified in Section 4022, or treatment without
21 a good faith prior examination of the patient and optometric reason.

22 (q) The failure to maintain adequate and accurate records
23 relating to the provision of services to his or her patients.

24 (r) Performing, or holding oneself out as being able to perform,
25 or offering to perform, any professional services beyond the scope
26 of the license authorized by this chapter.

27 (s) The practice of optometry without a valid, unrevoked,
28 unexpired license.

29 (t) The employing, directly or indirectly, of any suspended or
30 unlicensed optometrist to perform any work for which an optometry
31 license is required.

32 (u) Permitting another person to use the licensee's optometry
33 license for any purpose.

34 (v) Altering with fraudulent intent a license issued by the board,
35 or using a fraudulently altered license, permit certification or any
36 registration issued by the board.

37 (w) Except for good cause, the knowing failure to protect
38 patients by failing to follow infection control guidelines of the
39 board, thereby risking transmission of bloodborne infectious
40 diseases from optometrist to patient, from patient to patient, or

1 from patient to optometrist. In administering this subdivision, the
2 board shall consider the standards, regulations, and guidelines of
3 the State Department of Public Health developed pursuant to
4 Section 1250.11 of the Health and Safety Code and the standards,
5 guidelines, and regulations pursuant to the California Occupational
6 Safety and Health Act of 1973 (Part 1 (commencing with Section
7 6300) of Division 5 of the Labor Code) for preventing the
8 transmission of HIV, hepatitis B, and other bloodborne pathogens
9 in health care settings. As necessary, the board may consult with
10 the Medical Board of California, the California Board of Podiatric
11 Medicine, the Board of Registered Nursing, and the Board of
12 Vocational Nursing and Psychiatric Technicians of the State of
13 California, to encourage appropriate consistency in the
14 implementation of this subdivision.

15 (x) Failure or refusal to comply with a request for the clinical
16 records of a patient, that is accompanied by that patient's written
17 authorization for release of records to the board, within 15 days
18 of receiving the request and authorization, unless the licensee is
19 unable to provide the documents within this time period for good
20 cause.

21 (y) Failure to refer a patient to an appropriate physician if an
22 examination of the eyes indicates a substantial likelihood of any
23 pathology that requires the attention of that physician.

24 SEC. 14. No reimbursement is required by this act pursuant to
25 Section 6 of Article XIII B of the California Constitution because
26 the only costs that may be incurred by a local agency or school
27 district will be incurred because this act creates a new crime or
28 infraction, eliminates a crime or infraction, or changes the penalty
29 for a crime or infraction, within the meaning of Section 17556 of
30 the Government Code, or changes the definition of a crime within
31 the meaning of Section 6 of Article XIII B of the California
32 Constitution.